

News Release

109 Governor Street, Virginia 23219 • www.vdh.virginia.gov

FOR IMMEDIATE RELEASE

April 2, 2008

For More Information Contact:
Diane Powers, Communications, 804-864-7008
A.J. Hostetler, Communications, 804-864-7553
Virginia Powell, Medical Examiner's Office, 804-786-6047

STATE MEDICAL EXAMINER'S REPORT: MENTAL HEALTH PROBLEMS ARE COMMON IN SUICIDES

(RICHMOND, Va.)— More than half of Virginia's suicide victims suffer from mental health problems, according to a new report compiled by the Virginia Department of Health's Office of the Chief Medical Examiner. The new report, based on 2006 data from the Virginia Violent Death Reporting System, reveals that 56 percent of suicide victims had a mental health problem and 40 percent were receiving mental health treatment at the times of their deaths.

The Virginia edition of the National Violent Death Reporting System (NVDRS), released April 2008, found that of 1,405 violent deaths in Virginia in 2006, 64 percent were suicides and 29 percent were homicides. One percent of the violent deaths in Virginia resulted from unintentional firearm injury.

"Because this system provides specific information about each death and increases our understanding of suicides, VDH and our partners can develop interventions to reduce suicides in the Commonwealth and can be more effective in our outreach to those most prone to suicide," said State Health Commissioner Karen Remley, M.D., M.B.A.

The Virginia report analyzed the 895 suicides that occurred in the Commonwealth during 2006 and determined that:

- Three out of four suicide victims were males.
- Whites were more at risk for suicide than persons of other races.
- Suicide rates were highest in western Virginia and lowest in the northern region of the state.
- Physical health problems were factors in 23 percent of all suicides and in the majority of suicides (57 percent) committed by those age 65 and older.
- The three most common methods of fatal injury were firearms (55 percent), poison (19 percent) and asphyxia from hanging, strangulation or suffocation (18 percent).

(more)

- Prescription drugs were used by 85 percent of victims who overdosed on medication. Common prescription drugs used include opiates, such as morphine and oxycodone, and antidepressants, such as citalopram.
- Roughly one in five victims, 19 percent, had blood alcohol content at or above .08, which is the legal limit for intoxication.

The data show that those suicide victims who had mental health problems differed from other suicide victims in a few important ways:

- ♦ More women and white suicide victims had a mental health problem than male and black suicide victims.
- Roughly one in four suicide victims with a mental health problem used poison to end their life. Women with mental health problems used poison more often (42 percent) than firearms (33 percent) to end their lives.
- ♦ Suicide victims who had mental health problems disclosed their intent to commit suicide and/or had a history of suicide attempts more often than did suicide victims who did not have mental health problems. Suicide victims who did not have a mental health problem commonly experienced a crisis within two weeks of taking their lives, such as a problem with an intimate partner or criminal legal problems, or had been a perpetrator of violence within a month of their death.

"This information provides powerful clues about premature death due to violence," said Leah Bush, M.D., Virginia's chief medical examiner. "We have uncovered a great deal of despair and hopelessness through this data system. I hope this report will help us take constructive steps to prevent suicides in the commonwealth."

Virginia is one of 17 states that comprise the National Violent Death Reporting System, which is funded by the U.S. Centers for Disease Control and Prevention. The system examines deaths due to homicide, suicide, unintentional firearm injury, legal interventions and terrorism, and combines death information from several sources, particularly forensic pathology, forensic science, vital records and law enforcement. Data from the reports are used by injury and prevention partners to develop effective programs to reduce the number of violent deaths.

For more information about NVDRS, or to read the full report, visit www.vdh.virginia.gov/medexam/NVDRS.htm. For information about suicide prevention in Virginia, visit www.preventsuicideva.org.